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CONFIRMATION NO. 2636

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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\* *✓ CJA*

This appln claims benefit of 60/418,171 10/15/2002

\*\* FOREIGN APPLICATIONS \*\*\*\* *✓ CJA*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/28/2004

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature <i>CJA</i> Initials <i>CJA</i>		
STATE OR COUNTRY SWEDEN	SHEETS DRAWING 16	TOTAL CLAIMS 66	INDEPENDENT CLAIMS 5

## ADDRESS

28694

## TITLE

METHOD AND ARRANGEMENT FOR INTERPRETING A SUBJECTS HEAD AND EYE ACTIVITY

FILING FEE RECEIVED 2014	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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